

Sorted by Element Number

	Suggested Medical Data Elements for WCIS Sorted by Data Element Number
DN	DATA ELEMENT NAME
5	JURISDICTION CLAIM NUMBER
14	CLAIM ADMINISTRATOR MAILING POSTAL CODE
15	CLAIM ADMINISTRATOR CLAIM NUMBER
31	DATE OF INJURY
187	CLAIM ADMINISTRATOR FEIN
188	CLAIM ADMINISTRATOR NAME
208	MANAGED CARE ORGANIZATION IDENTIFICATION NUMBER
209	MANAGED CARE ORGANIZATION NAME
501	TOTAL CHARGE PER BILL
504	FACILITY CODE
507	PROVIDER AGREEMENT CODE
508	BILL SUBMISSION REASON CODE
509	SERVICE BILL DATE(S) RANGE
510	DATE OF BILL
511	DATE INSURER RECEIVED BILL
512	DATE INSURER PAID BILL
513	ADMISSION DATE
514	DISCHARGE DATE
516	TOTAL AMOUNT PAID PER BILL
518	DRG CODE
521	PRINCIPLE DIAGNOSIS CODE
522	ICD-9 CM DIAGNOSIS CODE
524	PROCEDURE DATE
528	BILLING PROVIDER LAST/GROUP NAME
534	GATEKEEPER INDICATOR
535	ADMITTING DIAGNOSIS CODE
537	BILLING PROVIDER PRIMARY SPECIALTY CODE
542	BILLING PROVIDER POSTAL CODE
544	BILL ADJUSTMENT REASON CODE
547	LINE NUMBER
552	TOTAL CHARGE PER LINE
557	DIAGNOSIS POINTER
574	TOTAL AMOUNT PAID PER LINE
586	RENDERING LINE PROVIDER FEIN
589	RENDERING LINE PROVIDER LAST/GROUP NAME
595	RENDERING LINE PROVIDER PRIMARY SPECIALTY CODE
599	RENDERING LINE PROVIDER STATE LICENSE NUMBER
600	PLACE OF SERVICE LINE CODE
624	INITIAL AMOUNT PAID
626	HCPCS PRINCIPLE PROCEDURE BILLED CODE
629	BILLING PROVIDER FEIN
630	BILLING PROVIDER STATE LICENSE NUMBER
638	RENDERING BILL PROVIDER LAST/GROUP NAME
642	RENDERING BILL PROVIDER FEIN

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643	RENDERING BILL PROVIDER STATE LICENSE NUMBER
649	RENDERING BILL PROVIDER SPECIALTY LICENSE NUMBER
651	RENDERING BILL PROVIDER PRIMARY SPECIALTY CODE
678	FACILITY NAME
679	FACILITY FEIN
680	FACILITY STATE LICENSE NUMBER
681	FACILITY MEDICARE NUMBER
688	FACILITY POSTAL CODE
704	MANAGED CARE ORGANIZATION FEIN
712	MANAGED CARE ORGANIZATION POSTAL CODE
715	JURISDICTION PROCEDURE BILLED CODE
717	HCPCS MODIFIER BILLED CODE
718	JURISDICTION MODIFIER BILLED CODE
726	HCPCS LINE PROCEDURE PAID CODE
727	HCPCS MODIFIER PAID CODE
729	JURISDICTION PROCEDURE PAID CODE
730	JURISDICTION MODIFIER PAID CODE
732	SERVICE ADJUSTMENT REASON CODE
737	HCPCS BILL PROCEDURE CODE

	<b>PHARMACY BENEFIT CODES</b>
502	BILLING TYPE CODE – DN502
527	PRESCRIPTION BILL DATE
561	PRESCRIPTION LINE NUMBER
563	DRUG NAME
564	BASIS OF COST DETERMINATION
565	TOTAL CHARGE PER LINE - RENTAL
566	TOTAL CHARGE PER LINE - PURCHASE
567	DME BILLING FREQUENCY CODE
570	DRUGS/SUPPLIES QUANTITY PURCHASED
571	DRUGS/SUPPLIES NUMBER OF DAYS
572	DRUGS/SUPPLIES BILLED AMOUNT
579	DRUGS/SUPPLIES DISPENSING FEE
604	PRESCRIPTION LINE DATE
721	NDC BILLED CODE
728	NDC PAID CODE